2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N97000001478

TI FILED
Sep 02, 2008
Secretary of State

Entity Name: SHELL BAY HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

6664 CABELLO DR 12058 SAN JOSE BLVD.

JACKSONVILLE, FL 32226 US 203

JACKSONVILLE, FL 32223 US

Current Mailing Address: New Mailing Address:

PO BOX 8897 PO BOX 600033

JACKSONVILLE, FL 32239 US JACKSONVILLE, FL 32260 US

FEI Number: 59-3509697 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GARVIN, SCOTT PROPERTY MANAGEMENT PARTNERS OF ST. JOHNS

6664 CABELLO DR 12058 SAN JOSE BLVD.

JACKSONVILLE, FL 32226 US SUITE 203
JACKSONVILLE, FL 32223 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ELAINE BROOKS 09/02/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: P () Delete Title: P (X) Change () Addition

 Name:
 GARVIN, SCOTT
 Name:
 GARVIN, SCOTT

 Address:
 6664 CABELLO DR
 Address:
 P.O.BOX 600033

City-St-Zip: JACKSONVILLE, FL 32226 US City-St-Zip: JACKSONVILLE, FL 32260 US

Title: VP () Delete Title: VP (X) Change () Addition Name: OLINTO, BRENDON Name: OLINTO, BRENDON

 Name:
 OLINTO, BRENDON
 Name:
 OLINTO, BRENDON

 Address:
 6733 BEATRIX DR
 Address:
 P.O.BOX 600033

 City-St-Zip:
 JACKSONVILLE, FL 32226 US
 City-St-Zip:
 JACKSONVILLE, FL 32260 US

Title: T () Delete Title: T (X) Change () Addition

Name: BRYANT, WILLIAM E Name: BRYANT, WILLIAM E Address: 6688 CABELLO DR Address: P.O.BOX 600033

City-St-Zip: JACKSONVILLE, FL 32226 US City-St-Zip: JACKSONVILLE, FL 32260 US

Title: ARC () Delete Title: S (X) Change () Addition Name: BENNETT, DAVID Name: BATCHELLER, DAVE

 Name:
 BENNETT, DAVID
 Name:
 BATCHELLER, DAVE

 Address:
 6717 BEATRIX DR
 Address:
 P.O.BOX 600033

 City-St-Zip:
 JACKSONVILLE, FL 32226 US
 City-St-Zip:
 JACKSONVILLE, FL 32260 US

Title: MAL () Delete Title: D (X) Change () Addition Name: VOGEL, HENRY Name: BENNETT, DAVID

 Address:
 6718 BEATRIX DR
 Address:
 P.O.BOX 600033

 City-St-Zip:
 JACKSONVILLE, FL 32226 US
 City-St-Zip:
 JACKSONVILLE, FL 32260 US

Title: MAL (X) Delete Title: () Change () Addition

 Name:
 BATCHELLER, DAVE
 Name:

 Address:
 6757 BEATRIX DRIVE
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32226 US
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELAINE BROOKS D 09/02/2008